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FILED

FEB 12 2008

RECEIVED
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN JOSE

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

BloodSAW Theoprie }
Plaintiff, }
et al. }
vs. }
Woodford J.S. }
Robertson J. }
Brownman J. }
Watch S. }
Defendant.)

CASE NO. CO8-0743-JF

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

I, BloodSAW T., declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes No ✓

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

26 Gross: _____ Net: _____

27 Employer: _____

28 _____

1 If the answer is "no," state the date of last employment and the amount of the gross and net
2 salary and wages per month which you received. (If you are imprisoned, specify the last
3 place of employment prior to imprisonment.)

4 In the year of 2000 at San Quentin Sta -
5 te Prison I had no pay number

7 2. Have you received, within the past twelve (12) months, any money from any of the
8 following sources:

13 c. Rent payments? Yes No

14 d Pensions, annuities or Yes No

15 life insurance payments?

16 e. Federal or State welfare payments, Yes No
17 Social Security or other govern-
18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
20 received from each.

21 \$13.00 from my Aunt on 1-14-08 Serial
22 No. 200479669335

23 3. Are you married? Yes No

24 Spouse's Full Name:

25 Spouse's Place of Employment:

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ _____ Net \$ _____

28 4. a. List amount you contribute to your spouse's support: \$ **N/A**

1 b. List the persons other than your spouse who are dependent upon you for
 2 support and indicate how much you contribute toward their support. (NOTE:
 3 For minor children, list only their initials and ages. DO NOT INCLUDE
 4 THEIR NAMES.).

5
 6
 7

8 5. Do you own or are you buying a home? Yes No

9 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

10 6. Do you own an automobile? Yes No

11 Make _____ Year _____ Model _____

12 Is it financed? Yes No If so, Total due: \$ _____

13 Monthly Payment: \$ _____

14 7. Do you have a bank account? Yes No (Do not include account numbers.)

15 Name(s) and address(es) of bank: _____

16 Present balance(s): \$ _____

17 Do you own any cash? Yes No Amount: \$ _____

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
 19 market value.) Yes No

20 _____

21 8. What are your monthly expenses?

22 Rent: \$ N/A Utilities: N/A

23 Food: \$ N/A Clothing: N/A

24 Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
26 \$ _____	\$ _____	\$ _____
27 \$ _____	\$ _____	\$ _____
28 \$ _____	\$ _____	\$ _____

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 N/A
4

5 10. Does the complaint which you are seeking to file raise claims that have been presented
6 in other lawsuits? Yes No

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8 which they were filed.

9 CV-00752-JF-550, C-07-4200-JF-550,
10

11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.

15 1-17 - 08
16

17 DATE

SIGNATURE OF APPLICANT

T. Bloodsaw

28

1
2 Case Number: _____
3
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8
9
10 CERTIFICATE OF FUNDS
11
12 IN
13 PRISONER'S ACCOUNT

14
15 I certify that attached hereto is a true and correct copy of the prisoner's trust account
16 statement showing transactions of _____ for the last six months
17 [prisoner name]
18 where (s)he is confined.

19 [name of institution]
20 I further certify that the average deposits each month to this prisoner's account for the
21 most recent 6-month period were \$ _____ and the average balance in the prisoner's
22 account each month for the most recent 6-month period was \$ _____.

23
24 Dated: _____ [Authorized officer of the institution]
25
26
27
28

1 Case Number: _____
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7 **CERTIFICATION OF FUNDS**

8 **IN**

9 **PRISONER'S ACCOUNT**

10
11 I certify that attached hereto is a true and correct copy of the prisoner's trust account
12 statement showing transactions of Theopric Kent Bloodsaw P20045 for the last six months at
13 Pelican Bay State Prison where he is confined.

14
15
16 I further certify that the average deposits each month to this prisoner's account for the
17 most recent 6-month period were \$1.50 and the average balance in the prisoner's account each
18 month for the most recent 6-month period was \$1.50. (20% = \$0.30)

19
20
21
22
23 Dated: 1/28/08

24 Lane aw & Sp
25 Authorized officer of the institution



26
27
28 THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST: 01-28-08
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY D. Kleppin
TRUST OFFICE

CALIFORNIA DEPARTMENT OF CORRECTIONS
PELICAN BAY STATE PRISON
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JUL. 01, 2007 THRU JAN. 25, 2008

ACCOUNT NUMBER : P20045

BED/CELL NUMBER: ASUE0000000001L

ACCOUNT NAME : BLOODSAW, THEOPRIC KENT

ACCOUNT TYPE: I

PRIVILEGE GROUP: D

TRUST ACCOUNT ACTIVITY

TRAN	DATE	CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
	07/01/2007		BEGINNING BALANCE					0.00
	08/09*DD30	CASH DEPOSIT	0699 #027			9.00		9.00
	08/13*W215	FEDERAL FILIN	0731 8/09				1.80	7.20
	08/13	WS12	LEGAL POSTAGE	0730			2.67	4.53
	08/13	WS12	LEGAL POSTAGE	0730			1.82	2.71
	08/13	WS12	LEGAL POSTAGE	0730			0.58	2.13
	08/14	WS13	MISC. CHARGES	0768			2.13	0.00
			ACTIVITY FOR 2008					
	01/14*DD30	CASH DEPOSIT	2981 #138			5.85		5.85
	01/15	WS16	LEGAL COPY CH	3013			1.90	3.95
	01/17	WS12	LEGAL POSTAGE	3049			0.20	3.75
	01/17	WS12	LEGAL POSTAGE	3049			1.31	2.44
	01/22	WS13	MISC. CHARGES	3121			0.20	2.24

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
01/22/2008	H118	LEGAL COPIES HOLD	3125	9.00
01/22/2008	H118	LEGAL COPIES HOLD	3125	2.90
01/22/2008	H118	LEGAL COPIES HOLD	3125	10.70

* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 05/13/02

CASE NUMBER: YA053506

COUNTY CODE: LA

FINE AMOUNT: \$ 250.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
07/01/2007		BEGINNING BALANCE		250.00



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST: 01-28-08
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY J. Kleppin
TRUST OFFICE

PELICAN BAY STATE PRISON
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JUL. 01, 2007 THRU JAN. 25, 2008

ACCT: P20045

ACCT NAME: BLOODSAW, THEOPRIC KENT

ACCT TYPE: I

* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 05/13/02
COUNTY CODE: LACASE NUMBER: YA053506
FINE AMOUNT: \$ 250.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
08/09/07	DR30	REST DED-CASH DEPOSIT	10.00-	240.00
01/14/08	DR30	REST DED-CASH DEPOSIT	6.50-	233.50

* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
 * IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. *

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	14.85	12.61	2.24	22.60	0.00



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST: 01-28-08
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY S. Kleppin
TRUST OFFICE

CURRENT
AVAILABLE
BALANCE

20.36-----

To the U.S. District Court Clerk this IFP is
late because of the misleading conduct of staff
the 6 month certified trust account statement was
suppose to be with the Civil Rights Complaint I
am harassed daily by both staff and inmates th-
anks for understanding despose of

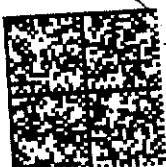
Thanks
Bloodsaw Theopric K.

NAME: Bloodsaw Theorie
CDC NO: P20045 HOUSING: ASII-EL

PELICAN BAY STATE PRISON
PO BOX 7500
CRESCENT CITY, CA 95532

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PELICAN BAY STATE PRISON
5805 Lake Earl Dr
Crescent City CA 95532



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United States District Court
Northern District of Calif.

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

ATTN: Clerk

LEGAL MAIL

450 Golden Gate Ave.
San Francisco, CA 94102